NON-PROVISIONAL UTILITY PATENT APPLICATION TRANSMITTAL - 37 CFR 1.53(b)

[] Duplicate (check, if applicable)



MAIL STOP PATENT APPLICATION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Attorney Docket No.: 5887-313U1 First Named Inventor: Jeffrey S. Collins Express Mail Label No.: EV343987292US

Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the non-provisional utility patent application entitled:

TOUCHSCREEN AMUSEMENT DEVICE

which	is:									
an	[X]	Original; or								
a	of prio	Continuation, [] Divisional, or [] Continuation-in-part (CIP) or Application No. filed . pated Group/Art Unit: or Class , Subclass .								
[X]		on-provisional patent application is based on Provisional Patent Application No. 6,237, filed July 7, 2003.								
Enclos	ed are:									
	[X]	Specification (including Abstract) and claims: 11 pages.								
	[]	Application Data Sheet.								
	[X]	Newly executed Declaration (copy).								
	[]	Copy of Declaration from prior application.								
	[]	Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).								
	[X]	<u>6</u> sheets of drawings (formal).								
	[]	Microfiche computer program (Appendix).								
	[]	Nucleotide and/or Amino Acid Sequence Submission, including:								
•	[]	Computer readable copy [] Paper Copy [] Verified Statement.								
	[X]	Under PTO-1595 Cover Sheet, an assignment of the invention								
	[X]	Name of Assignee: Merit Industries, Inc.								
	[]	Certified copy(ies) of Application No(s). filed is/are filed: [] herewith or [] in prior application .								
		Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under 37 C.F.R. §1.27 as [] an Independent Inventor, or [] a Small Business Concern, or [] a Non-Profit Organization.								
	[]	Preliminary Amendment.								
	[X]	Information Disclosure Statement, PTO/SB/08A, and cited reference.								
	[] Request for Nonpublication of Application Under 35 U.S.C. §12									
	[]	Other:								

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$375			BASIC FEE: \$750	
Total	16 - 20 =	0.00	X9	\$	OR	X18	\$ 0.00
Independent	3 - 3=	0.00	X42	\$	OR	X84	\$ 0.00
Multiple Dependent Claims Present			\$140	\$	OR	\$280	\$
ak standt o	1. A.C.		TOTAL	\$	OR	TOTAL	\$ 750.00

- [] The commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.
- [X] A check in the amount of \$750.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge and/or credit **Deposit Account** No. 50-1017 (Billing No. 205887.0315) as noted below. A duplicate copy of this sheet is enclosed.
 - [X] Any overpayments or deficiencies in the above-calculated fee.
 - [] Filing fee in the amount of \$____ as calculated above.
 - [X] Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
 - [X] In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

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(Date)

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